TO					STAFF SUMMARY SHEET								
ТО	ACTION	SIGNATURE (Surnam	e), GRADE AND DATE		TO	ACTION	SIGNATUR	E (Surname), GRADE AND DATE					
Program Director	Coord			6									
Squadron CC	Coord			7									
59 MDOG CC	Coord			8									
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RNAME OF ACT	  -   ION OFFICER A	ND GRADE	SYMBOL		PHONE		TYPIST'S INITIALS	SUSPENSE DATE					
SUBJECT								DATE					
SUMMARY													
1. LEAVE / TDY LOCATION:													
<ul> <li>4. TRAINING: <ul> <li>A. Force Protection/Anti-Terrorism Training</li> <li>Date Completed:</li> <li>B. SERE 100, Level "B" Training</li> <li>Date Completed:</li> <li>C. High Risk Capture (HRC) Training (if applicable)</li> <li>Date Completed:</li> <li>D. Human Relations Training</li> <li>Date Completed:</li> </ul> </li> <li>E. OSI Briefing (if applicable, not required for Canada, Mexico, Western Eruope)</li> <li>call 671-9465 to schedule appt.</li> <li>Date Completed:</li> <li>F. Member should also visit www.fcg.pentagon.mil, to see non-classified info about the country they are travelling to.</li> </ul>													
5. INVOLVEMENT IN HIGH-RISK ACTIVITY: YES / NO If answered yes above, member must complete AETC Form 410.													
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